

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines.

12FE4M5

Ron Leach for Congress Campaign Committee

ADDRESS (number and street) ▼

P.O. Box 647

Check if different than previously reported. (ACC)

Brandenburg

KY

40108

2. **FEC IDENTIFICATION NUMBER** ▼

C C00543538

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)

KY

02

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

- Primary (12P)  General (12G)  Runoff (12R)
- Convention (12C)  Special (12S)

Election on  /  /  in the State of

(c) 30-Day **POST**-Election Report for the:

- General (30G)  Runoff (30R)  Special (30S)

Election on  /  /  in the State of

5. Covering Period

/  /

through

/  /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Ms. Theresa Drake

Signature of Treasurer Ms. Theresa Drake

[Electronically Filed]

Date

/  /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only								
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Ron Leach for Congress Campaign Committee**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	5863.95	23040.62
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	5863.95	23040.62
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	10937.28	47128.87
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	10937.28	47128.87
8. Cash on Hand at Close of Reporting Period (from Line 27).....	2561.75	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	26600.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Ron Leach for Congress Campaign Committee**

Report Covering the Period: From:  /  /  To:  /  /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	300.00	6068.72
(ii) Unitemized.....	445.00	3485.00
(iii) TOTAL of contributions from individuals ▶	745.00	9553.72
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	5118.95	13486.90
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	5863.95	23040.62
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	5000.00	26600.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	5000.00	26600.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	50.00
16. <b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	10863.95	49690.62

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	10937.28	47128.87
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	10937.28	47128.87

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2635.08
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	10863.95
25. SUBTOTAL (add Line 23 and Line 24).....	13499.03
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	10937.28
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2561.75

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Ron Leach for Congress Campaign Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Craig Astor**

Mailing Address 5167 N L And N Turnpike Rd

City State Zip Code  
Hodgenville KY 42748-9232

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
UPS Aircraft Mechanic

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**700.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
12		20		2013

**Transaction ID : VN8P9C3P8W8**

Amount of Each Receipt this Period  
**250.00**

\* Earmarked Contribution: See Below

**B.** Full Name (Last, First, Middle Initial)  
**ACTBLUE**

Mailing Address PO Box 382110

City State Zip Code  
Cambridge MA 02238-2110

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**545.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
12		20		2013

**Transaction ID : VN8P9C3P8W8E**

Amount of Each Receipt this Period  
**250.00**

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
**Charles Leach**

Mailing Address 3324 Panhandle Rd

City State Zip Code  
Lynchburg OH 45142-9361

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**550.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
12		02		2013

**Transaction ID : VN8P9C3P8M5**

Amount of Each Receipt this Period  
**50.00**

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**300.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ron Leach for Congress Campaign Committee**

**A.** Full Name (Last, First, Middle Initial)  
**ACTBLUE**

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_  
545.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 02 / 2013

**Transaction ID : VN8P9C3P8M5E**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
 50.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

FEC ID number of contributing federal political committee. **C** \_\_\_\_\_

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Amount of Each Receipt this Period  
 \_\_\_\_\_

**C.** Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

FEC ID number of contributing federal political committee. **C** \_\_\_\_\_

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Amount of Each Receipt this Period  
 \_\_\_\_\_

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

\_\_\_\_\_ 0.00

\_\_\_\_\_ 300.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 27
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ron Leach for Congress Campaign Committee**

Full Name (Last, First, Middle Initial) <b>Ron Leach</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 01 / 2013
Mailing Address 62 Merion Ct		<b>Transaction ID : VN8P9C3P3P1</b>
City Brandenburg	State KY	
FEC ID number of contributing federal political committee. C H4KY02089		Amount of Each Receipt this Period 19.57
Name of Employer Retired	Occupation Retired	* In-Kind: Online Advertising
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 8387.52	

Full Name (Last, First, Middle Initial) <b>Ron Leach</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 02 / 2013
Mailing Address 62 Merion Ct		<b>Transaction ID : VN8P9C3P3Y4</b>
City Brandenburg	State KY	
FEC ID number of contributing federal political committee. C H4KY02089		Amount of Each Receipt this Period 600.00
Name of Employer Retired	Occupation Retired	* In-Kind: Website Management
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 9021.42	

Full Name (Last, First, Middle Initial) <b>Ron Leach</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 02 / 2013
Mailing Address 62 Merion Ct		<b>Transaction ID : VN8P9C3P4A9</b>
City Brandenburg	State KY	
FEC ID number of contributing federal political committee. C H4KY02089		Amount of Each Receipt this Period 33.90
Name of Employer Retired	Occupation Retired	* In-Kind: Office Supplies
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 9021.42	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	653.47
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 27
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ron Leach for Congress Campaign Committee**

Full Name (Last, First, Middle Initial) <b>Ron Leach</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 03 / 2013
Mailing Address 62 Merion Ct		<b>Transaction ID : VN8P9C3P3W8</b>
City Brandenburg	State KY	
FEC ID number of contributing federal political committee. C H4KY02089		Amount of Each Receipt this Period 52.20
Name of Employer Retired	Occupation Retired	* In-Kind: Online Advertising
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 9073.62	

Full Name (Last, First, Middle Initial) <b>Ron Leach</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 07 / 2013
Mailing Address 62 Merion Ct		<b>Transaction ID : VN8P9C3P483</b>
City Brandenburg	State KY	
FEC ID number of contributing federal political committee. C H4KY02089		Amount of Each Receipt this Period 130.85
Name of Employer Retired	Occupation Retired	* In-Kind: Stationery
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 9204.47	

Full Name (Last, First, Middle Initial) <b>Ron Leach</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 11 / 2013
Mailing Address 62 Merion Ct		<b>Transaction ID : VN8P9C3P467</b>
City Brandenburg	State KY	
FEC ID number of contributing federal political committee. C H4KY02089		Amount of Each Receipt this Period 220.48
Name of Employer Retired	Occupation Retired	* In-Kind: Campaign Materials
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 9424.95	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	403.53
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 27
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ron Leach for Congress Campaign Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Ron Leach**

Mailing Address 62 Merion Ct

City State Zip Code  
Brandenburg KY 40108-7102

FEC ID number of contributing federal political committee. **C H4KY02089**

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
9672.75

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2013

**Transaction ID : VN8P9C3P3R7**

Amount of Each Receipt this Period  
247.80

\* In-Kind: Online Advertising

**B.** Full Name (Last, First, Middle Initial)  
**Ron Leach**

Mailing Address 62 Merion Ct

City State Zip Code  
Brandenburg KY 40108-7102

FEC ID number of contributing federal political committee. **C H4KY02089**

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10272.75

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 04 / 2013

**Transaction ID : VN8P9C3P3X6**

Amount of Each Receipt this Period  
600.00

\* In-Kind: Website Management

**C.** Full Name (Last, First, Middle Initial)  
**Ron Leach**

Mailing Address 62 Merion Ct

City State Zip Code  
Brandenburg KY 40108-7102

FEC ID number of contributing federal political committee. **C H4KY02089**

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10312.75

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 01 / 2013

**Transaction ID : VN8P9C3P3Q9**

Amount of Each Receipt this Period  
40.00

\* In-Kind: Online Advertising

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

887.80

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 27
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ron Leach for Congress Campaign Committee**

Full Name (Last, First, Middle Initial) <b>Ron Leach</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 04 / 2013
Mailing Address 62 Merion Ct		<b>Transaction ID : VN8P9C3P418</b>
City Brandenburg	State KY	
FEC ID number of contributing federal political committee. C H4KY02089		Amount of Each Receipt this Period 800.00
Name of Employer Retired	Occupation Retired	* In-Kind: Website Management
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 11112.75	

Full Name (Last, First, Middle Initial) <b>Ron Leach</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 09 / 2013
Mailing Address 62 Merion Ct		<b>Transaction ID : VN8P9C3P5G7</b>
City Brandenburg	State KY	
FEC ID number of contributing federal political committee. C H4KY02089		Amount of Each Receipt this Period 1575.00
Name of Employer Retired	Occupation Retired	* In-Kind: Database
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 12687.75	

Full Name (Last, First, Middle Initial) <b>Ron Leach</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2013
Mailing Address 62 Merion Ct		<b>Transaction ID : VN8P9C3P1R1</b>
City Brandenburg	State KY	
FEC ID number of contributing federal political committee. C H4KY02089		Amount of Each Receipt this Period 799.15
Name of Employer Retired	Occupation Retired	* In-Kind: Mileage Expenses
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 13486.90	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3174.15
<b>TOTAL</b> This Period (last page this line number only).....	5118.95

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 27  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Ron Leach for Congress Campaign Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Ron Leach**

Mailing Address 62 Merion Ct

City State Zip Code  
Brandenburg KY 40108-7102

FEC ID number of contributing federal political committee. **C H4KY02089**

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**26600.00**

Date of Receipt  
 /  /   
**10 / 16 / 2013**

**Transaction ID : VN8P9C3P4F8**

Amount of Each Receipt this Period  
 **5000.00**

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**5000.00**

**5000.00**

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 27	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ron Leach for Congress Campaign Committee**

Full Name (Last, First, Middle Initial) <b>A. Lacey Connelly</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2013
Mailing Address 6675 Brandenburg Rd Apt 4		Amount of Each Disbursement this Period 1750.00 <b>Transaction ID : VN7Q19Q6FK7</b>
City Ekron State KY Zip Code 40117-8530	Purpose of Disbursement Campaign Management Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Theresa Drake</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2013
Mailing Address PO Box 443		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : VN7Q19Q6KY0</b>
City Vine Grove State KY Zip Code 40175-0443	Purpose of Disbursement Treasurer Contract Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Theresa Drake</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2013
Mailing Address PO Box 443		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : VN7Q19Q6KZ8</b>
City Vine Grove State KY Zip Code 40175-0443	Purpose of Disbursement Treasurer Contract Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2250.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 27			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Ron Leach for Congress Campaign Committee**

Full Name (Last, First, Middle Initial) <b>A. Theresa Drake</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2013
Mailing Address PO Box 443		Amount of Each Disbursement this Period 250.00
City Vine Grove	State KY	
Zip Code 40175-0443	Purpose of Disbursement Treasurer Contract Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Theresa Drake</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address PO Box 443		Amount of Each Disbursement this Period 250.00
City Vine Grove	State KY	
Zip Code 40175-0443	Purpose of Disbursement Treasurer Contract Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State:	District:	

Full Name (Last, First, Middle Initial) <b>c. Facebook</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 1 Hacker Way		Amount of Each Disbursement this Period 19.57
City Menlo Park	State CA	
Zip Code 94025-1456	Purpose of Disbursement Online Advertising - See In Kind Contribution from Candidate on 10/01/2013	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 27	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Ron Leach for Congress Campaign Committee**

**A. Facebook**

Full Name (Last, First, Middle Initial)  
Mailing Address 1 Hacker Way

City Menlo Park State CA Zip Code 94025-1456

Purpose of Disbursement  
Online Advertising - See In Kind Contribution from Candidate on 10/03/2013

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 10 / 03 / 2013

Amount of Each Disbursement this Period: 52.20

Transaction ID : VN7Q19Q6EX3

[MEMO ITEM]  
\*

**B. Facebook**

Full Name (Last, First, Middle Initial)  
Mailing Address 1 Hacker Way

City Menlo Park State CA Zip Code 94025-1456

Purpose of Disbursement  
Online Advertising - See In Kind Contribution from Candidate on 11/01/2013

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 11 / 01 / 2013

Amount of Each Disbursement this Period: 247.80

Transaction ID : VN7Q19Q6F23

[MEMO ITEM]  
\*

**C. Facebook**

Full Name (Last, First, Middle Initial)  
Mailing Address 1 Hacker Way

City Menlo Park State CA Zip Code 94025-1456

Purpose of Disbursement  
Online Advertising - See In Kind Contribution from Candidate on 12/01/2013

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 12 / 01 / 2013

Amount of Each Disbursement this Period: 40.00

Transaction ID : VN7Q19Q6F80

[MEMO ITEM]  
\*

**SUBTOTAL** of Disbursements This Page (optional) ..... 0.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 27	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ron Leach for Congress Campaign Committee**

Full Name (Last, First, Middle Initial) <b>A. Farley Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2013
Mailing Address 1013 S. 6th St.		Amount of Each Disbursement this Period 130.85
City Louisville	State KY Zip Code 40203-3319	
Purpose of Disbursement Stationery - See In Kind from Candidate on 10/07/2013		Transaction ID : VN7Q19Q6EZ9
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Grace By Design</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 128 E Woodlawn Ave		Amount of Each Disbursement this Period 220.48
City Louisville	State KY Zip Code 40214-1902	
Purpose of Disbursement Campaign Materials - See In Kind Contribution by Candidate on 10/11/2013		Transaction ID : VN7Q19Q6F15
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. Kentucky Secretary of State</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2013
Mailing Address 700 Capitol Ave Rm 148		Amount of Each Disbursement this Period 500.00
City Frankfort	State KY Zip Code 40601-3410	
Purpose of Disbursement Filing Fee		Transaction ID : VN7Q19Q6EH8
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 27	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Ron Leach for Congress Campaign Committee**

Full Name (Last, First, Middle Initial) <b>A. Ron Leach</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 62 Merion Ct		Amount of Each Disbursement this Period 19.57
City Brandenburg	State KY	
Zip Code 40108-7102	Purpose of Disbursement Online Advertising	* In-Kind Received
Candidate Name <b>Mr. Ron Leach</b>	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: KY District: 02		

Full Name (Last, First, Middle Initial) <b>B. Ron Leach</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013
Mailing Address 62 Merion Ct		Amount of Each Disbursement this Period 600.00
City Brandenburg	State KY	
Zip Code 40108-7102	Purpose of Disbursement Website Management	* In-Kind Received
Candidate Name <b>Mr. Ron Leach</b>	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: KY District: 02		

Full Name (Last, First, Middle Initial) <b>c. Ron Leach</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013
Mailing Address 62 Merion Ct		Amount of Each Disbursement this Period 33.90
City Brandenburg	State KY	
Zip Code 40108-7102	Purpose of Disbursement Office Supplies	* In-Kind Received
Candidate Name <b>Mr. Ron Leach</b>	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: KY District: 02		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	653.47
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 27			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Ron Leach for Congress Campaign Committee**

Full Name (Last, First, Middle Initial) <b>A. Ron Leach</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address 62 Merion Ct		Amount of Each Disbursement this Period 52.20
City Brandenburg	State KY	
Zip Code 40108-7102	Purpose of Disbursement Online Advertising	Transaction ID : VN8P9C3P3W8I
Candidate Name <b>Mr. Ron Leach</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: KY	District: 02	

Full Name (Last, First, Middle Initial) <b>B. Ron Leach</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2013
Mailing Address 62 Merion Ct		Amount of Each Disbursement this Period 130.85
City Brandenburg	State KY	
Zip Code 40108-7102	Purpose of Disbursement Stationery	Transaction ID : VN8P9C3P483I
Candidate Name <b>Mr. Ron Leach</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: KY	District: 02	

Full Name (Last, First, Middle Initial) <b>c. Ron Leach</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 62 Merion Ct		Amount of Each Disbursement this Period 220.48
City Brandenburg	State KY	
Zip Code 40108-7102	Purpose of Disbursement Campaign Materials	Transaction ID : VN8P9C3P467I
Candidate Name <b>Mr. Ron Leach</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: KY	District: 02	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	403.53
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 27			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Ron Leach for Congress Campaign Committee**

Full Name (Last, First, Middle Initial) <b>A. Ron Leach</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address 62 Merion Ct		Amount of Each Disbursement this Period 247.80
City Brandenburg	State KY	
Zip Code 40108-7102	Purpose of Disbursement Online Advertising	* In-Kind Received
Candidate Name <b>Mr. Ron Leach</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: KY District: 02		

Full Name (Last, First, Middle Initial) <b>B. Ron Leach</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 62 Merion Ct		Amount of Each Disbursement this Period 600.00
City Brandenburg	State KY	
Zip Code 40108-7102	Purpose of Disbursement Website Management	* In-Kind Received
Candidate Name <b>Mr. Ron Leach</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: KY District: 02		

Full Name (Last, First, Middle Initial) <b>c. Ron Leach</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2013
Mailing Address 62 Merion Ct		Amount of Each Disbursement this Period 896.76
City Brandenburg	State KY	
Zip Code 40108-7102	Purpose of Disbursement Reimbursement	* In-Kind Received
Candidate Name <b>Mr. Ron Leach</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: KY District: 02		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1744.56
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 27	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ron Leach for Congress Campaign Committee**

**A. Print Works**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 505

City Leitchfield State KY Zip Code 42755-0505

Purpose of Disbursement Campaign Materials

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2013

Amount of Each Disbursement this Period: 896.76

Transaction ID : VN7Q19Q6EN0

[MEMO ITEM]  
\*

**B. Ron Leach**

Full Name (Last, First, Middle Initial)  
Mailing Address 62 Merion Ct

City Brandenburg State KY Zip Code 40108-7102

Purpose of Disbursement Online Advertising

Candidate Name Mr. Ron Leach

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: KY District: 02

Date of Disbursement: 12 / 01 / 2013

Amount of Each Disbursement this Period: 40.00

Transaction ID : VN8P9C3P3Q9I

\* In-Kind Received

**c. Ron Leach**

Full Name (Last, First, Middle Initial)  
Mailing Address 62 Merion Ct

City Brandenburg State KY Zip Code 40108-7102

Purpose of Disbursement Website Management

Candidate Name Mr. Ron Leach

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: KY District: 02

Date of Disbursement: 12 / 04 / 2013

Amount of Each Disbursement this Period: 800.00

Transaction ID : VN8P9C3P418I

\* In-Kind Received

**SUBTOTAL** of Disbursements This Page (optional) ..... 840.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 27	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ron Leach for Congress Campaign Committee**

Full Name (Last, First, Middle Initial) <b>A. Ron Leach</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 62 Merion Ct		Amount of Each Disbursement this Period 1575.00 <b>Transaction ID : VN8P9C3P5G71</b>
City Brandenburg	State KY	
Zip Code 40108-7102	Purpose of Disbursement Database	* In-Kind Received
Candidate Name <b>Mr. Ron Leach</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: KY	District: 02	

Full Name (Last, First, Middle Initial) <b>B. Ron Leach</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 62 Merion Ct		Amount of Each Disbursement this Period 799.15 <b>Transaction ID : VN8P9C3P1R11</b>
City Brandenburg	State KY	
Zip Code 40108-7102	Purpose of Disbursement Mileage Expenses	* In-Kind Received
Candidate Name <b>Mr. Ron Leach</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: KY	District: 02	

Full Name (Last, First, Middle Initial) <b>C. NGP VAN, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 1650.00 <b>Transaction ID : VN7Q19Q6EB1</b>
City Washington	State DC	
Zip Code 20005-5006	Purpose of Disbursement Database	* In-Kind Received
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4024.15
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 27	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ron Leach for Congress Campaign Committee**

Full Name (Last, First, Middle Initial) <b>A. NGP VAN, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 1575.00
City Washington	State DC	
Zip Code 20005-5006	Purpose of Disbursement Database - See In Kind Contribution from Candidate on 12/09/2013	Transaction ID : VN7Q19Q6FQ8
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Splash Digital</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013
Mailing Address 455 S 4th St		Amount of Each Disbursement this Period 600.00
City Louisville	State KY	
Zip Code 40202-2593	Purpose of Disbursement Website Management - See In Kind from Candidate on 10/02/2013	Transaction ID : VN7Q19Q6EW5
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Splash Digital</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 455 S 4th St		Amount of Each Disbursement this Period 600.00
City Louisville	State KY	
Zip Code 40202-2593	Purpose of Disbursement Website Management - See In Kind from Candidate on 11/04/2013	Transaction ID : VN7Q19Q6F48
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 27	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ron Leach for Congress Campaign Committee**

Full Name (Last, First, Middle Initial) <b>A. Splash Digital</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address 455 S 4th St		Amount of Each Disbursement this Period 800.00
City Louisville	State KY Zip Code 40202-2593	
Purpose of Disbursement Website Management - See In Kind from Candidate on 12/04/2013		Transaction ID : VN7Q19Q6ET9
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	10915.71

**SCHEDULE C (FEC Form 3)**  
**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VN8P9A2X2Y8L

Ron Leach for Congress Campaign Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2014

Ron Leach

Primary  
 General  
 Other (specify) ▼

Mailing Address  
62 Merion Ct

City State ZIP Code  
Brandenburg KY 40108-7102

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
100.00 0.00 100.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 04 / D 01 / Y 2013 M M / D D / Y none none % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... 100.00  
**TOTALS** This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Ron Leach for Congress Campaign Committee**

Transaction ID : VN8P9A2X2Z6L

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
**Ron Leach**

**[PERSONAL FUNDS]**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
62 Merion Ct

City State ZIP Code  
Brandenburg KY 40108-7102

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
19500.00 0.00 19500.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 04 / D 20 / Y 2013 M M / D D / Y none none % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶ 19500.00

**TOTALS** This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Ron Leach for Congress Campaign Committee** Transaction ID : VN8P9B42BQ2L

**LOAN SOURCE** Full Name (Last, First, Middle Initial) *[PERSONAL FUNDS]* Election: 2014  
**Ron Leach**  Primary  
 Mailing Address 62 Merion Ct General  
 Other (specify) ▼

City State ZIP Code  
 Brandenburg KY 40108-7102

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2000.00	0.00	2000.00

**TERMS** Date Incurred Date Due Interest Rate Secured:  
 M M / D D / Y Y Y Y M M / D D / Y Y Y Y none % (apr)  Yes  No  
 08 / 16 / 2013 none

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

**SUBTOTALS** This Period This Page (optional)..... ▶ 2000.00  
**TOTALS** This Period (last page in this line only)..... ▶ [ ]  
 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Ron Leach for Congress Campaign Committee** Transaction ID : VN8P9C3P4F8L

**LOAN SOURCE** Full Name (Last, First, Middle Initial) *[PERSONAL FUNDS]* Election: 2014  
**Ron Leach**  Primary  
 Mailing Address 62 Merion Ct General  
 Other (specify) ▼

City State ZIP Code  
 Brandenburg KY 40108-7102

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000.00	0.00	5000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 10 / D 16 / Y 2013 Y	M / D / Y none Y	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	5000.00
<b>TOTALS</b> This Period (last page in this line only).....	26600.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Ron Leach for Congress Campaign Committee**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Lacey Connelly</b>	Nature of Debt (Purpose): Campaign Management Fee
Mailing Address 6675 Brandenburg Rd Apt 4	
City State Zip Code Ekron KY 40117-8530	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="1750.00"/>	<b>Transaction ID : VN5RH9H67F4</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="0.00"/>	Payment This Period <input style="width:100%;" type="text" value="1750.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="0.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Theresa Drake</b>	Nature of Debt (Purpose): Treasurer Contract Fee
Mailing Address PO Box 443	
City State Zip Code Vine Grove KY 40175-0443	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="250.00"/>	<b>Transaction ID : VN5RH9H67G2</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="0.00"/>	Payment This Period <input style="width:100%;" type="text" value="250.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text"/>	Outstanding Balance at Close of This Period <input style="width:100%;" type="text"/>
Amount Incurred This Period <input style="width:100%;" type="text"/>	Payment This Period <input style="width:100%;" type="text"/>

<b>1) SUBTOTALS</b> This Period This Page (optional) ..... ▶	<input style="width:100%;" type="text" value="0.00"/>
<b>2) TOTALS</b> This Period (last page this line number only) ..... ▶	<input style="width:100%;" type="text" value="0.00"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only)..... ▶	<input style="width:100%;" type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input style="width:100%;" type="text"/>